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- of the -

M E D I C A L   O F F I C E R   O F   H E A L T H  

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for the year 1965.  

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BY

DR. HUGH MORRISON.

M.B., Ch.B., D.P.H.





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WELLINGTON URBAN DISTRICT COUNCIL (SOMERSET)

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH  
FOR THE YEAR 1965

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PUBLIC HEALTH STAFF, 1965

MEDICAL OFFICER OF HEALTH

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CHAIRMAN OF THE COUNCIL

R.J. TREDWIN, ESQ.

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To:

THE CHAIRMAN AND MEMBERS OF THE  
WELLINGTON URBAN DISTRICT COUNCIL

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Report for 1965. The report is drawn up in accordance with instructions from the Ministry of Health and contains the usual information on the health and sanitary circumstances of the district. There are two sections, the first referring to the province of the Medical Officer of Health, and the second contributed by the Public Health Inspector. The report, in the main, follows the lines of those of previous years, but certain fresh facts have been incorporated in the various sections.

The statistics of the year show that there has been a slight increase of population. The birth rate was fractionally higher and the death rate lower than those for the whole of England and Wales. Infant mortality, usually taken as a good index of the state of the public health of a community, was low at 14.8. The commonest cause of death, as is usually found, was disease of the heart and blood vessels.

The incidence of infectious diseases was very low, and the immunisation of children was carried on at a generally satisfactory level.

An event of importance during the year was a heavy pollution by toxic chemicals of the River Tone following on a period of excessively heavy rainfall. This entailed a great deal of investigation and other work designed to discover the source of pollution and to obviate its recurrence. At the end of the year this work was still in progress, and it was believed that the possibility of similar incidents happening in the future had been greatly lessened. A fuller report of this episode may be available at a later date.

A detailed account is given of the operation of the Mass Radiography Service, together with a table showing the kind of diseases which can be revealed by this very valuable routine investigation. It will be noted that for those attending a Mass Radiography session in the ordinary way the odds against any chest trouble being revealed are extremely high. At the same time in the occasional case disease is discovered which probably has not been suspected, and often at a stage when treatment can be applied with good prospect of success.

I wish to thank the Members of the Council, the Clerk and officials of other Departments, and the Public Health Inspector for their willing assistance and co-operation.

I am,

Your obedient servant,

HUGH MORRISON.





WELLINGTON URBAN DISTRICT

Area (in acres) ... ..	2,186
Estimate of Resident Population, mid year 1965 ... ..	7,960
Census population 1961 ... ..	7,670
Number of inhabited houses according to the Rate Books on the 1st April, 1965 ... ..	2,774
Rateable Value, 1st April, 1965 ... ..	£242,281
Sum represented by a 1d Rate, 1st April, 1965 ... ..	£982

EXTRACTS FROM THE VITAL STATISTICS FOR THE YEAR 1965.

1. Births

(a) Live Births

	M.	F.	Total	
Legitimate	71	52	123	Crude birth rate
Illegitimate	4	4	8	per 1,000 of the
				estimated resident
Totals:	75	56	131	population.....

16.6

Standardised Birth Rate, Wellington U.D. .... 18.92

Birth Rate, England and Wales .... 18.0

(b) Stillbirths

Total ..... 4

Rate per 1,000 (live and still) births -

Wellington U.D. .... 29.6

England and Wales .... 15.7

Rate per 1,000 estimated resident population -

Wellington U.D. .... 0.5

2. Deaths

(a) Total deaths ..... 98

Crude Rate per 1,000 estimated resident population ..... 12.3

Standardised death rate, Wellington U.D. .... 7.8

Death rate for England and Wales .... 11.5

(b) Maternal Mortality

Total maternal mortality from all causes ..... 0

(c) Infant Mortality

Deaths of infants under 1 year of age -

Total ..... 2

Deaths among legitimate infants ..... 2

Deaths among illegitimate infants ..... 0

Death rate per 1,000 total (live and still) births -

Wellington U.D. .... 14.8

England and Wales .... 19.0

(d) Deaths from Cancer (all ages) -

Total ..... 16



# CAUSES OF DEATH DURING 1965

Cause of Death	M	F	Total
Tuberculosis respiratory ... ..	-	-	-
Tuberculosis other ... ..	-	-	-
Syphilitic disease ... ..	-	-	-
Diphtheria ... ..	-	-	-
Whooping Cough ... ..	-	-	-
Meningococcal Infections ... ..	-	-	-
Acute Poliomyelitis ... ..	-	-	-
Measles ... ..	-	-	-
Other infective and parasitic diseases ...	-	-	-
Malignant Neoplasm, Stomach... ..	2	-	2
Malignant Neoplasm, Lung, Bronchus..	4	-	4
Malignant Neoplasm, Breast ... ..	-	1	1
Malignant Neoplasm, Uterus ... ..	-	1	1
Other Malignant and Lymphatic Neoplasms...	5	3	8
Leukemia, aleukemia ... ..	1	-	1
Diabetes ... ..	-	1	1
Vascular Lesions of nervous system..	7	11	18
Coronary disease, angina ... ..	11	4	15
Hypertension with heart disease ... ..	-	-	-
Other heart disease ... ..	9	7	16
Other circulatory disease ... ..	4	5	9
Influenza ... ..	-	-	-
Pneumonia ... ..	1	2	3
Bronchitis ... ..	3	-	3
Other disease of respiratory system. ...	-	2	2
Ulcer of stomach and duodenum ... ..	-	-	-
Gastritis, enteritis and diarrhoea..	-	-	-
Nephritis and Nephrosis ... ..	-	-	-
Hyperplasia of prostate ... ..	1	-	1
Pregnancy, Childbirth, Abortion ... ..	-	-	-
Congenital Malformations ... ..	2	-	2
Other defined and ill-defined diseases ...	3	4	7
Motor vehicle accidents ... ..	-	-	-
All other accidents ... ..	1	-	1
Suicide ... ..	2	1	3
Homicide and operation of war ... ..	-	-	-
All causes - Total:	56	42	98

## INFANT MORTALITY DURING 1965

There were two deaths in infants up to the age of one year which gave a rate per 1,000 births of 14.8. The cause of death in both cases was congenital defect.

## GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

### Domiciliary Services

#### 1. Medical and Nursing

There are six general medical practitioners living and carrying on practice in the Urban District. There are adequate arrangements when required for domiciliary consultation with consultants serving the Taunton and West Somerset Area and, speaking generally, the practice of medicine in the district is of a high standard. The provisions for domiciliary nursing are also satisfactory.





## 2. Home Help Service

This service, administered by the Somerset County Council, is well established in the district, and invaluable assistance is given in many cases of illness and the domestic difficulties arising therefrom. There is no doubt that this is one of the most useful of all public services. I am indebted to the County Organiser for the following analysis of cases where help was arranged in Wellington Urban District during 1965:-

Care of children .....	1
Post and pre-Natal .....	4
Mental Illness .....	1
Maternity .....	2
Old age and infirmity .....	59
Chronic sick .....	6
Post operative .....	3
General illness .....	1

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## Hospital Services

The Hospital Services of the district are administered by the Taunton Hospital Management Committee under the general direction of the S.W. Regional Hospital Board. A detailed re-appraisal of these services is going on at the present time following on the production by the Government of a comprehensive Hospital Plan for the nation. Some of the provisions for the needs of various types of patients are detailed below:-

### 1. General Medical and Surgical

The Taunton and Somerset Hospital, together with Musgrove Park Hospital, which is also situated in the Borough of Taunton and which is probably eventually destined to supersede the first-named establishment, cater for most medical and surgical conditions. Musgrove Park Hospital takes most of the adult cases, and also has a comprehensive Paediatric department. The Taunton and Somerset Hospital is, in the meantime, dealing with Orthopaedics and Ophthalmology. It also houses the Casualty department for the area. Both hospitals have out-patients facilities in addition to in-patient beds. Certain cases requiring special investigation or treatment such as neurosurgery or radio-therapy are referred to Bristol Hospitals for this purpose. Wellington Cottage Hospital provides valuable facilities for local cases which do not require to be sent to large institutions, and complete consultant cover is available for the work carried out there.

### 2. Chronic Sick

Since the appointment of a Geriatrician to the West Somerset Clinical Area, arrangements for hospital treatment of the chronic sick have been put on a more satisfactory basis. Most of these cases are admitted to Trinity Hospital in Taunton. There continues to be a very great pressure on accommodation of this type, and this is a branch of medical care which will undoubtedly make increasing demands on medical and ancillary services as the years go on.

### 3. Infectious Diseases

Cases of infectious diseases from Wellington Urban District are sent to the Isolation Hospital situated in the Borough of Taunton. The bulk of the Isolation Hospital work is done in cubicle blocks. The pattern of infectious diseases requiring admission to hospital is certainly changing. Many of the patients admitted suffer from vague pyrexial illnesses in which the diagnosis is in doubt. Scarlet Fever which used to provide a large proportion of the admissions is, at the present time, a relatively mild disease, and most of the cases are nursed at home. Measles and whooping cough still demand hospital treatment in the occasional case where there are severe complications or where home nursing is impracticable. Diphtheria has not been seen in the district for many years. Poliomyelitis is being brought under control by inoculation,



and in the past few years there has not been a severe epidemic in this part of the country. Many cases are, however, admitted to hospital on suspicion of suffering from poliomyelitis, and these often provide difficult diagnostic problems. The extensive use of antibiotics has resulted in the appearance of severe infections due to certain bacteria which were formerly regarded as fairly harmless, and this leads to the admission of cases of this kind to the Isolation Hospital. Thus, although the types of illnesses dealt with change over the years, the total number of cases requiring isolation treatment has rather tended to increase than to diminish.

#### 4. Tuberculosis

Cases of Pulmonary and Non Pulmonary Tuberculosis come under the Regional Hospital Board for treatment, which is supervised by the Chest Physician for the area. The Sanatoria are at Wincanton and Taunton for Pulmonary cases. Cases requiring orthopaedic treatment are becoming very uncommon, but when they do occur, arrangements for treatment are made according to individual need.

#### 5. Poliomyelitis

Suspected cases are sent for diagnosis to the Taunton Isolation Hospital. If the condition is confirmed they are seen by Regional Specialists who arrange for continuation treatment either as out-patients or as in-patients at Bath Orthopaedic Hospital.

#### 6. Mentally Sick

Cases are admitted to the Mental Hospital at Tone Vale, near Taunton. The psychiatric specialists conduct out-patients' clinics for the area, and it is felt that now, more than ever before, mental patients are having the benefit of treatment at an earlier and more hopeful stage of the disease.

### CLINICS AND TREATMENT CENTRES

#### 1. Tuberculosis

Clinics for patients suffering from this disease, and for the supervision of suspects and contacts are held by the Chest Physicians at Musgrove Park Hospital. There is an After-Care Committee working in co-operation with these clinics. Mass Radiography has been carried out from time to time on various groups of the county population by a team working from a centre in Bristol, and Wellington is one of the districts which has had the benefit of this service.

#### 2. Venereal Disease

A combined clinic and treatment centre is carried on at the Taunton and Somerset Hospital which caters for male and female patients of this and surrounding districts.

Early cases of syphilis are usually sent to Frenchay Hospital, Bristol, for a fortnight's intensive penicillin treatment as in-patients. Afterwards they continue to have observation and treatment at the Taunton Clinic.

These conditions which had, for some years, become rather uncommon in the district have been latterly showing a marked increase in prevalence; and this is in accordance with the country as a whole.

#### 3. Maternity and Child Welfare

The Maternity and Child Welfare Acts are administered by the County Council, under whose supervision are also the Health Visitors and Midwives practising within the area. There is an excellent Maternity Home in the Urban District of Wellington. Obstetric Consultants in Taunton are available for consultation with medical practitioners in the district. Abnormal and complicated cases are admitted for hospital treatment when necessary. Every case of Puerperal Pyrexia and Maternal Mortality is investigated by the Medical Staff of the County Council.





A valuable service is provided for premature infants. Small or premature babies unsuitable for nursing at home are admitted to a Special Care Unit at Musgrove Park Hospital, an ambulance equipped with an Oxygenaire incubator being sent to collect them from their homes. If the baby is deemed fit to be nursed at home, the district midwife can obtain advice and special equipment to help her with the management of the case.

A weekly clinic is held in premises at Messrs. Fox Bros. An Assistant County Child Welfare Officer attends on the first and third Fridays of each month, in addition to Health Visitors who attend weekly.

LABORATORY FACILITIES

The Public Health Laboratory Service has a Laboratory in Taunton at which all the usual specimens connected with Public Health work, such as throat and nose swabs, blood, faeces and sputum are examined. The Staff of the Laboratory also give very useful assistance in the investigation of epidemic outbreaks. Chemical analyses are carried out as requested at the Laboratory of the County Analyst at Taunton.

AMBULANCE FACILITIES

Ambulance transport for all cases is the responsibility of the Somerset County Council. The main Ambulance Station and Control for the south-west of the County is situated at the entrance to Musgrove Park Hospital. The Ambulance Station serves a very wide area and at 31st December the establishment of vehicles and staff was as follows:-

Vehicles -	7 Ambulances
	6 Sitting-case Ambulances
	1 Car
Staff -	5 Sub-officers
	24 Driver-attendants

All vehicles at this Station are fitted with radio.

NATIONAL ASSISTANCE ACT, 1948 - SECTION 47

No statutory action has been taken under this Act but one case was dealt with by informal action.

MASS RADIOGRAPHY

Regular sessions are held by the Regional Hospital Board Unit on one afternoon of each fortnight at the Longforth Road Car Park. Residents who wish to have a chest X-ray are welcomed at any of these sessions and it is strongly urged that this facility should be freely used, especially by those over the age of 40 who would do well to have an annual chest X-ray.

As an example of the type of work done in a unit of this sort the following table shows the findings obtained from routine examinations at the Welling-ton centre during 1965.

	Male	Female	Total
Number examined	359	272	631
Abnormalities detected	19	6	25
Details of abnormalities detected-			
Abnormality of Diaphragm...	1	-	1
Active Tuberculosis..	2	-	2
Healed Pulmonary Tuberculosis	3	3	6
Acquired Cardiac Lesion	4	1	5
Bacterial and Virus Infections of the Lungs...	2	-	2
Bronchitis and Emphysema	1	2	3
Bronchial Carcinoma...	1	-	1
Fibrosis from Pneumonitis..	1	-	1
Hilar Adenitis	1	-	1
Pulmonary Fibrosis	1	-	1
Pleural Thickening	1	-	1
Pleural Effusion	1	-	1



The following table shows the findings of surveys held at various industrial establishments in Wellington during the year:-

	Male	Female	Total
Number examined ... ..	334	261	595
Abnormalities detected ... ..	6	3	9
Details of abnormalities detected-			
Acquired Cardiac Lesion...	2	1	3
Basal Pleural Thickening..	1	-	1
Healed Pulmonary Tuberculosis...	1	-	1
Old Pleural Thickening ...	-	1	1
Pneumoconiosis ... ..	1	-	1
Pneumoconiosis + P.M.F....	1	-	1
Sarcoidosis ... ..	-	1	1

PREVALENCE AND CONTROL OF INFECTIOUS DISEASES

The year again showed a very low incidence of notifiable infectious diseases. Of these only measles occurred, and this produced a small crop of 28 cases. It may soon be possible to offer immunisation against measles which would be of benefit especially to weakly or ailing children who are endangered by the complications of the disease. The only other notifications received referred to two cases of non-pulmonary tuberculosis.

At the end of the year the tuberculosis register contained the names and addresses of 16 cases of pulmonary tuberculosis and 10 cases of non-pulmonary tuberculosis.

IMMUNISATION

Diphtheria Immunisation

The immunisation campaign against diphtheria has been an outstanding success in this district and in the country as a whole; but it remains essential that all young children should be given the benefit of this protection, and there is some evidence that without constant stress on this fact, the number of children being immunised each year might easily fall to a dangerously low level.

Total "Primaries" under 4 years .....	85
Total "Primaries" 5 - 7 years .....	14
Total "Primaries" 8 - 16 years .....	16
Total re-inforcements .....	184

Whooping Cough Immunisation

It is customary in the county of Somerset to combine immunisation against whooping cough with the course used to protect against diphtheria, and this is also a most valuable public health measure, since whooping cough is now probably the most serious of the common infectious diseases affecting young children.

26 babies under one year of age were immunised against whooping cough. This is 19% of the total annual live births.

Tetanus Immunisation

Immunisation against tetanus is now regarded as a very important protective procedure. The disease is not common, but when it does strike the consequences can be devastating, and life is always endangered. There are some indications that tetanus may occur more frequently in the West Country than in many other areas of Great Britain. It is perhaps not generally realised that the disease may follow the most trivial injury, and that in a fair proportion of cases there may be no obvious injury at all preceeding the attack, although the bacteria must then be presumed to have entered the body through some minute abrasion.

It has been customary for many years to give anti-tetanus serum to patients presenting wounds of various sorts, especially those which are deeply penetrating or contaminated with soil; but it is now usual to combine this with injections of anti-tetanus toxoid which gives a much longer lasting immunity. This is the substance used in the routine immunisation of children, and the number of injections





required is three. They are given in conjunction with the diphtheria and whooping cough courses. All parents are strongly urged to ensure that their children are given this valuable protection.

<u>Number of children immunised:-</u>					<u>Primaries</u>	<u>Re-inforcing</u>
Under 1 year	...	...	...	...	26	-
1 - 3 years	...	...	...	...	59	4
4 - 7 years	...	...	...	...	15	97
8 - 16 years	...	...	...	...	61	62

Poliomyelitis Immunisation

Poliomyelitis immunisation which formerly involved injections is now carried out by giving the material by mouth. During 1965 the following persons received a course of primary vaccination or oral doses:-

Children born in 1965..	...	...	15
Children born 1958 - 64	...	...	38
Children born 1949 - 57	...	...	1
			<hr/> 54 <hr/>

109 children between 4 and 7 years and 8 children between 8 and 16 years received a re-inforcing dose.

Smallpox Vaccination

The aim in future will be to vaccinate children routinely in the second year of life.

					<u>Vaccination</u>		<u>Re-vaccination</u>	
					<u>1964</u>	<u>1965</u>	<u>1964</u>	<u>1965</u>
Under 1 year	...	...	...	...	4	6	-	-
1 year	...	...	...	...	42	37	-	-
2 - 4 years	...	...	...	...	1	5	-	-
5 - 15 years	...	...	...	...	-	-	2	4
					<hr/> 47 <hr/>	<hr/> 48 <hr/>	<hr/> 2 <hr/>	<hr/> 4 <hr/>

B.C.G. Immunisation against T.B.

Immunisation against tuberculosis by the use of B.C.G. vaccine is offered to susceptible children at the age of thirteen.

160 children attending school in the Urban District were given the Heaf Test and 88 were given B.C.G. Vaccination.

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## SANITARY CIRCUMSTANCES IN THE AREA

### WATER SUPPLY

On the 1st April 1963, the public water undertaking was transferred to the newly formed West Somerset Water Board and the Council ceased to have direct control. The Council, under the West Somerset Water Board Order, has one representative on the Board. After taking over the water undertaking the Board ceased to draw water from the Payton and Westford Springs and the source of the supply is now derived from the Pitt Farm Borehole and Clatworthy Reservoir, the latter being situated in the area of the Williton Rural Council. The Payton and Westford Springs are being maintained for use only in case of emergency. The water is chlorinated before it reached the consumer.

The County Public Analyst report on the chemical analysis of a sample taken from a consumer's tap is that it is a hard water of good organic purity. The amount of iron in drinking water should not exceed 0.5 parts per million and this water is exactly on the limit. The water from Pitt Farm Borehole is a hard water of satisfactory organic purity but contains an excessive amount of iron (0.9 parts per million). This water when mixed with the water from Clatworthy Reservoir gave the result as above of 0.5 parts per million. The presence of iron, although undesirable, is of no danger to health.

The supply of the area has been satisfactory as regards quantity. It is constant and it has not been necessary to restrict the hours of supply.

Three samples of raw water on bacteriological examination gave good results, and sixteen samples of chlorinated water taken from consumer's taps which were bacteriologically examined, all gave satisfactory results.

A sample has been chemically analysed from the Pitt Farm Borehole supply and gave satisfactory results as regards organic purity but the degree of total hardness (280.0 p.p.m.) gives some concern. The amount of iron fluctuates. Since 1952 it has varied between 0.5 to 2.5 parts per million. The last sample gave 0.9 p.p.m. which is more than is desirable in water used for drinking and domestic purposes.

There are 2,760 dwellinghouses supplied direct from the public mains serving a population of 7,913 and three dwellings with a population of five are supplied by means of standpipes.

The water is not liable to have any plumbo-solvent action, it is moderately hard, the total hardness being 280.0 parts per million, this being the mixed water from the two sources of supply as supplied to the consumer.

It has not been necessary to take action in respect of any form of contamination.

### SEWAGE DISPOSAL

The Tone Sewage Works consists essentially of continuous flow settlement tanks, the effluent from which flows on to a sprinkler aeration and bacteria beds. The clarified effluent so formed discharges into the River Tone. It is of statutory quality and has caused no nuisance in the river. The effluent continues to give satisfactory results on chemical analysis. These works are running at full capacity.

In addition to the above main Sewage Disposal Works, there is a smaller works dealing with a limited amount of sewage to the South of the Town known as Mitchells Pool. These works serve the Pyles Thorne area and the Priory. The effluent from these works give satisfactory chemical analysis results. A small disposal plant at Farthings Pitts deals with sewage from thirteen dwellings in this area.

The drainage of the Town is by a combined system. That is the sewers receive not only the sewage proper but also the rainwater that falls in the area. Where possible the surface water from new buildings is now taken to soakaways.

The River Tone bounds the Town in the North and West. The treated effluent of a woollen factory passes into the River as well as the effluent from the sewage works. The water carriage system is universal in the district.

As building continues to increase the Tone and Mitchells Pool Sewage Works are becoming inadequate to effectively deal with the increased flow. The Council has instructed their Consulting Engineers to prepare a scheme to lay a trunk sewer from Mitchells Pool, and eventually close these Works, to the Tone Disposal Works which will be enlarged to treat the whole of the sewerage of the Urban District with the exception of the small amount at Farthings Pitts.





## PUBLIC CLEANSING

This is undertaken by Direct Labour and all premises are visited weekly. The type of refuse now produced has a very high unburnable content due to the increasing installation of improved solid fuel heating appliances by which much of the domestic refuse is consumed leaving burnt ashes, dust, tins and bottles etc. for disposal. This, when fed to the refuse destructor, is not easily destroyed, and results in excessive clinkering. The destructor is incapable of dealing with the quantity or type of refuse now collected per day, approximately 10 tons. To partially overcome this difficulty each load is raked over a grid in order to separate as much ash and small unburnable material as possible, and the siftings taken to an adjoining tip. The remainder is disposed of in the destructor. Even so, the quantity to be disposed of is in excess of the destructor's capacity and the surplus is disposed of by tipping. It is estimated that the old canal tip will be full in the near future and with this in view the Council has taken steps to acquire a further extension of the canal site.

Trade refuse from business premises is collected weekly. Two bins are collected free and all in excess are charged at the rate of 1/- per bin for the first three and 9d. for each additional bin. The size of the bin is restricted to  $3\frac{1}{2}$  cubic feet.

## ERADICATION OF BED BUGS

No Council houses or other premises were found to be infested during the year.

## OFFENSIVE TRADES

There are no offensive trades in the district within the meaning of Section 107 of the Public Health Act, 1936.

## REGISTERED COMMON LODGING HOUSES

There are no registered common lodging houses within the Urban District.

## SCHOOLS

The sanitary conditions of the schools in the area continue to be reasonably satisfactory, and they are all on the public water supply and sewerage system.

## CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT, 1960

In the District there is one Caravan Site which is licensed for 50 residential caravans and 10 touring (overnight) caravans which is situated off the trunk road A38. Considerable improvements have been carried out and the caravans are placed on concrete standings, adequate mains water is supplied by sufficient standpipes and there are two toilet blocks with sufficient showers and sanitary accommodation. The roads are laid in tarmac and lighted by electricity and parking spaces are provided.

## SWIMMING BATHS AND POOLS

There is one privately owned open-air swimming pool in the district which is open to the public. It has a capacity of 65,625 gallons, and during the summer months there have been problems of overcrowding, but arrangements have been made to avoid this in future seasons.

The rate of circulation of water in the pool is below the standard recommended by the Ministry of Health, and there has been difficulty at times in keeping chlorination up to the desirable level. 28 samples were taken for bacteriological examination of which 25 were satisfactory and 3 suspicious. Careful checking of conditions at the pool and frequent inspections are made to avoid danger to public health.



## SANITARY INSPECTION OF THE AREA

### NATURE AND NUMBER OF INSPECTIONS DURING THE YEAR:-

Dwelling houses ... ..	863
Factories, workshops and workplaces ...	29
Drainage ... ..	168
Miscellaneous ... ..	86

### NUMBER OF NOTICES SERVED DURING THE YEAR:-

Informal Notices ... ..	77
Statutory Notices ... ..	0

### RESULTS OF NOTICES SERVED:-

Total Notices complied with ... ..	62
Notices standing over at the end of year	15

### SHOP ACT, 1950

Certain powers relating to health and comfort and sanitary provisions are delegated by the County Council to this Authority. The conditions of the Act have been well complied with and where non-compliance was observed it was brought to the notice of the shop-keeper and rectified without resort to Statutory action.

Most assistants are able to go home for the luncheon hour as the majority of the shops employing assistants close. The larger shops have staff rest rooms and facilities for taking a light meal on the premises. It has, therefore, not been necessary for action to be taken for the provision of facilities for taking meals in or about the shops. Washing facilities with hot and cold water for the staff is now provided.

I have experienced no difficulty in getting work done during the year which has mainly comprised of repairs and renewal of sanitary conveniences, improved heating arrangements, renewal of defective wash basins and abatement of nuisances. I am again pleased to record the co-operation given by the majority of shop-keepers in observing the Act.

No special points of administrative difficulty or of special interest have arisen during the year and there has been no undue delay in getting conditions remedied.





FACTORIES ACT, 1961

URBAN DISTRICT OF WELLINGTON 1965

Prescribed particulars on the administration of the

Factories Act, 1961

PART I OF THE ACT

1. INSPECTIONS for the purpose of provisions as to health made by the Public Health Inspector:-

Premises	Number on Register	N U M B E R O F		
		Inspect- ions	Written Notices	Occupiers prosecuted
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	16	14	6	-
(ii) Factories not included in (i) in which Section 7 is enforced by Local Authority	21	16	5	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out workers' premises)	-	-	-	-
TOTAL:-	37	30	11	-



## 2. CASES IN WHICH DEFECTS WERE FOUND

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	referred to H.M. Inspector	by H.M. Inspector	
Want of cleanliness (S.1)	4	4	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floors (S.6)	1	1	-	-	-
Sanitary Conveniences (S.7)					
(a) insufficient	1	1	-	1	1
(b) unsuitable or defective	2	2	-	-	-
(c) not separate for sexes	-	-	-	1	-
Other offences against the Act	4	4	-	-	-
TOTAL	12	12	-	2	-

### BAKEHOUSES

There are two bakehouses in the District and nine inspections were made. They are kept in a satisfactory condition and are on the public water supply. Minor defects have been noted and dealt with by informal action.





MEAT INSPECTION

On the 1st October 1963 the Meat Inspection Regulations, 1963, came into force requiring that all home killed meat must be inspected before it leaves the slaughterhouse. The Regulations also permit the Council to make a charge for the inspection of all carcasses and offal. 100% inspection of all animals slaughtered is now carried out and the maximum charges made.

There are two slaughterhouses in the District in regular use. Details of inspections and condemnations were as follows:-

Carcasses and Offal inspected and condemned in whole or in part.

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	279	0	2	1062	132
Number inspected	279	0	2	1062	132
<u>All diseases except Tuberculosis and Cysticerci.</u>					
Whole carcasses condemned	0	0	0	0	0
Carcasses of which some part or organ was condemned	18	0	0	5	0
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	6.45	0	0	0.74	0
<u>Tuberculosis only:-</u>					
Whole carcasses condemned	0	0	0	0	0
Carcasses of which some part or organ was condemned	0	0	0	0	0
Percentage of the number inspected affected with tuberculosis	0	0	0	0	0
<u>Cysticercosis:-</u>					
Carcasses of which some part or organ was condemned	0	0	0	0	0
Carcasses submitted to treatment by refrigeration	0	0	0	0	0
Generally and totally condemned	0	0	0	0	0
<u>Weight of Meat condemned (in lbs) for:-</u>					
(a) Tuberculosis	0	0	0	0	0
(b) Cysticercosis	0	0	0	0	0
(c) Other	270	0	0	25	0
Total (in lbs) condemned:-	270	0	0	25	0



## FOOD POISONING OUTBREAKS

No outbreaks of food poisoning have occurred in the district during the year under review.

## FOOD PREMISES

Inspections are made of food premises and advice given on methods of improving conditions. It is pleasing to record that the majority of traders are willing to co-operate.

51 inspections have been made of the food premises registered under the Food & Drugs Act, 1955, which are, on the whole, kept in a satisfactory state. The food traders are co-operative in having suggested improvements carried out, and no exceptional difficulties have been encountered. There remains improvement to be made in personal hygiene in the handling and wrapping of food.

There are 10 premises registered for the Preparation or Manufacture of Preserved Foods, 49 for the sale of ice-cream and two to manufacture and sell ice-cream under the Food & Drugs Act, 1955. The six are butchers premises for the manufacture of preserved meats, meat pies and sausages etc.

With the exception of two small retail manufacturers of ice-cream whose sales from their shops are small, all other ice-cream sold in the district is pre-packed and sold as received from the large manufacturers.

## FOOD HYGIENE REGULATIONS

Inspections have been continued during the year and the general standard of food premises has improved, and food producers and retailers are realising the need and advantage derived from clean and up-to-date premises, this is supported by the increasing awareness of the public for the need of clean habits in food handling, and a more critical attitude towards those who fail to observe proper elementary precautions. The process is one of education on the actual premises when various bad practices can be pointed out, and it is also important that hygiene practices should be observed in the home so that the younger generation will have the benefit. It has not been necessary to take legal proceedings during the year.

Experience has proved beyond doubt that the vital part played by refrigeration in minimising the risk of food poisoning is greatly to be encouraged.

Number of food premises in the area	...	...	...	...	...	...	71
Number registered							
For the sale of ice-cream	...	...	...	...	...	...	49
For preparation of other food	...	...	...	...	...	...	6
Number of premises fitted to comply with Regulation 16	...	...	...	...	...	...	67
(Wash basins, hot and cold water etc.)							
Number of premises to which Regulation 19 applies	...	...	...	...	...	...	43
(Sinks, hot and cold water etc.)							
Number of premises fitted to comply with Regulation 19	...	...	...	...	...	...	37

## TUBERCULOSIS ORDER

No cows were slaughtered under this order during the year.

## HOUSING

The Council is making great efforts to provide further housing accommodation and hope to develop at the Priory by erecting approximately 160 dwellings. Due to many setbacks it was not possible to proceed with this during 1965. Improvement Grants are available to provide bathrooms, hot water, food stores and indoor toilet facilities as well as for larger schemes and during the year 26 standard grants and one discetionary grant was made.

The Council is in the process of modernising all their pre-war dwellings which number 318 and in addition 28 post-war flats will be brought up to present day standards. The work, in the main, consists of constructing an upstairs bathroom with a washhand basin and W.C., enlargement of the kitchen and providing a hot water supply to serve the bathroom and kitchen. In most dwellings by providing a W.C. in the new bathroom will, with the existing one, make available two W.C.'s - one internal and one external. The flats will not have an additional W.C. Electric wiring is being renewed and additional points provided.





The following table shows the number of dwellings owned by the Council and dates of erection.

DWELLINGS OWNED BY THE COUNCIL

Nos.	Address	Date Erected	Houses	Flats	Bungalows	Total
1-32	Alexandra Road	1927	32			32
1- 4	Alexandra Flats	1953		4		4
1-36	Blackdown Road	1947	24	12		36
1-52	Brendon Road	1936	52			52
31-34	Buckwell	1959		4		4
1-56	Bulford	1960/63	2	44	10	56
1-42	Church Fields	1923	42			42
1- 8	Church Green	1946		8		8
5-12	Court Drive	1953		8		8
26-39	Crosslands	1930	14			14
1-39	Greenway Road	1938	28	8		36
1-99	Howard Road	1948/49, 1951	56	21		77
39-53	Holyoake Street)		8			8
30&32	Seymour Street )	1954	2			2
1-37	Longforth Road	1923	34			34
21-36	Lower Foxmoor Road	1928	16			16
1-102	Oaken Ground	1951/55	66	36		102
6-21	Oaken Ground, Northside	1964		16		16
1-22	Olands Road	1926	22			22
1-59	Parklands Road	1949/50	54	4		58
1-16	Popes Lane	1928	16			16
1-106	Priory	1956/57	40	66		106
1-42	Quantock Road	1938	34	12		46
1-16	Stedhams Close	1963		16		16
1-28	Stoneleigh	1953/55	16	16		32
27-46	Tone Hill	1955	12	8		20
67-74	Tone Hill	1949	10			10
14-21	Victoria Street	1923	8			8
36-42	Holyoake Street O.P.Ds	1959		4	11	15
1-34	Bulford Close O.P.Ds	1963	1	32		33
2- 8	Champford Lane		4			4
	Southernhay			3		3
			<u>593</u>	<u>322</u>	<u>21</u>	<u>936</u>

The following table is required by the Ministry of Housing and Local Government:-

1. The number of houses which on inspection were considered to be unfit for human habitation ... .. 1
2. The number of houses the defects in which were remedied in consequence of informal action by the Local Authority or their Officers ... .. 62
3. The number of Representations made to the Local Authority with a view to (a) serving of notices requiring the execution of works; or (b) the making of Demolition or Closing Orders ... .. 1
4. The number of informal notices served requiring the execution of works ... .. 77
5. The number of houses which were rendered fit after service of formal notices ... .. 0
6. The number of Demolition or Closing Orders made ... .. 0
7. The number of houses in respect of which an Undertaking was accepted under Sub-Section (4) of Section 16 of the Housing Act, 1957 ... .. 1
8. The number of houses demolished ... .. 0



## PREVENTION OF DAMAGE BY PESTS ACT, 1949

The Prevention of Damage by Pests Act, 1949, emphasises the duty of every Local Authority to take all necessary steps to secure, as far as practicable, that their District is kept free from rats and mice. Occupiers must notify the Local Authority if their premises are infested with rodents. It is encouraging to record that occupiers of infested premises have been extremely helpful in co-operation with the Department in the clearance of vermin, and in no instance has recourse to statutory action been necessary. The Council employ one part-time operator.











